

(1) PLACE OF BIRTH  
County of Rickland  
Township of .....

**CERTIFICATE OF BIRTH**  
STATE OF SOUTH CAROLINA  
Bureau of Vital Statistics  
State Board of Health

File No. — For State Registrar Only  
**5035**

Inc. Town of ..... Registration District No. 38 Registered No. 117  
or ..... (For use of Local Registrar)  
City of Columbia S.C. (If birth occurs in a hospital or other institution, give name of same instead of street and number.) St. .... Ward 2

(2) Full Name of Child Paul Thomson If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL? Boy (4) Twin or Triplet? No (5) Number in order of birth 1 (6) Are Parents Married? Yes (7) DATE OF BIRTH Feb 26 23  
(Name of Month) (Day) (Year)

FATHER  
(8) FULL NAME Letha Thomson

(9) PRESENT POSTOFFICE OF FATHER .....

(10) COLOR OR RACE Colored (11) AGE AT LAST BIRTHDAY 35  
(Years)

(12) BIRTHPLACE Columbia S.C.

(13) OCCUPATION dead

(20) Number of children born to mother, including present birth 5

MOTHER  
(14) NAME BEFORE MARRIAGE Leah Thompson

(15) PRESENT POSTOFFICE OF MOTHER Columbia S.C.

(16) COLOR OR RACE Colored (17) AGE AT LAST BIRTHDAY 32  
(Years)

(18) BIRTHPLACE Columbia S.C.

(19) OCCUPATION washing

(21) Number of children of this mother now living, including present birth 4

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE**

(22) I hereby certify that I attended the birth of this child, who was born at 630 M.  
on the date above stated. (Born alive or stillborn) (Hour A. M. or P. M.)

(23) (Signature) Mary G. Hamilton

(24) State whether Physician or Midwife (25) Address of Physician or Midwife  
Midwife 1209 Buchanan St

(Given name added from a supplemental report)

(26) Witness .....  
(Signature of Witness necessary only when question 23 is signed by mark)

(27) Filed Mar 1 1923 (28) C. J. Sloan Local Registrar

\*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.